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QUARLES & I RENAISSANCE TWO NORTH C	I h Sta add trai	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
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APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.
10/725,951	10/725,951 12/02/2003		Peter Slowinski		118729.00002 2876		
TITLE OF INVENTION: METHOD AND APPARATUS FOR EXERCISING INTERNAL AND EXTERNAL OBLIQUE MUSCLES							
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUI	E FEE T	OTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$0		\$1000	11/20/2006
EXAMINER		ART UNIT	CLASS-SUBCLASS	7			
AMERSON, LORI BAKER		3764	482-146000	-			
"Fee Address" indip PTO/SB/47; Rev 03-0 Number is required. 3. ASSIGNEE NAME A: PLEASE NOTE: Unl	ess an assignee is ident	"Indication form ed. Use of a Customer A TO BE PRINTED ON Tiffed below, no assignee	or agents OR, alternat (2) the name of a sing registered attorney or 2 registered patent att listed, no name will be THE PATENT (print or ty data will appear on the	ame of a single firm (having as a member a diattorney or agent) and the names of up to red patent attorneys or agents. If no name is name will be printed.			
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a. Applicant claim			Y status. See 37 CF	R 1.27(g)(2). assignee or other party in			
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Authorized Signature	Kohut	Ditte		Date Sep	otembe	r 5, 2006	
Typed or printed name Robert D. Atkins			Registration No. 34,288				
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